Docket No.:

## DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if

the application of which					
is attached hereto	OR 🖾 was Number	filed onNovember 13, 200 r PCT/FR2003/003357	13, 2003 as PCT International Applicatio		
	(Confir	mation No.			
I hereby state that I have reviewed and u by any amendment specifically referred to	nderstand the contents of the above.	e above identified application	, including the cla	ims, as ameno	
I acknowledge the duty to disclose in continuation-in-part application(s), mater the national or PCT international filing da	iai information which becan	ne available between the filin	ed in 37 CFR 1.50 g date of the prior	6, including application a	
I hereby claim foreign priority under 35 Ubreeder's rights certificate(s), or 365(a) of United States of America, listed below a inventor's or plant breeder's rights and	any PC1 international appared have also identified below	olication(s) which designated and one and the box and	at least one country	y other than to	
inventor's or plant breeder's rights certification on which priority is claimed.	ficate(s), or any PCT inter	national application(s) having	g a filing date be	fore that of t	
inventors of plant offeeders rights certi-	ficate(s), or any PCT internotes  Country	national application(s) having  Filing Date	g a filing date be  Priority (  Yes		
application on which priority is claimed.	nicate(s), or any PC1 inter		Priority (	Claimed	
Prior Application Number(s)  02 14425	Country FRANCE	Filing Date 19/11/2002	Priority ( Yes Yes	Claimed No	
Prior Application Number(s)  02 14425  I hereby claim benefit under 35 United Sta	Country FRANCE	Filing Date 19/11/2002	Priority ( Yes Yes	Claimed No	
Prior Application Number(s)  02 14425  I hereby claim benefit under 35 United Sta	Country FRANCE  ates Code §119(e) of any Unition Number(s)  States Code §120 of any Unites, listed below and, insofar s or PCT International applies my duty to disclose any	Filing Date 19/11/2002  ited States provisional applica Filing Date  nited States application(s) or as the subject matter of each cation in the manner provided information material to the p	Priority (Yes Yes Yes  tion(s) listed below  §365(c) of any PC of the claims of the by the first paragraph stentability of this	Claimed No  CT Internation is application aph of Title 3	

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the same USPTO Customer Number.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:							
Given Name (first and middle [if any]) Jean		Family Name or Surname BEGUINOT					
Inventor's Signature	Date May 20, 2005		May 20, 2005				
Residence: City LE CREUSOT	State	Country FRANCE		Citizenship FRANCE			
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City LE CREUSOT  NAME OF SECOND INVENTOR:	State FRANCE	Zip 71200		Country FRANCE			
) Given Name							
(first and middle [if any]) Jean-Georges Family Name or Surname BRISSON							
Inventor's Signature			Date	May 20, 2005			
Residence: City LE CREUSOT	State	Country FRANCE		Citizenship FRANCE			
Mailing Address: 45bis rue Lamartine - 71200 LE CREUSOT - France							
City LE CREUSOT	State FRANCE	Zip 71200		Country FRANCE			
NAME OF THIRD INVENTOR:				•			
Given Name (first and middle [if any])		Family Name or Surnam	e				
Inventor's Signature		Date					
Residence: City	State	Country		Citizenship			
Mailing Address:							
City	State	Zip		Country			
NAME OF FOURTH INVENTOR:							
Given Name (first and middle [if any])	Family Name or Surname						
Inventor's Signature		Date					
Residence: City	State	Country		Citizenship			
Mailing Address:							
City	State	Zip		Country			
NAME OF FIFTH INVENTOR: Given Name							
(first and middle [if any])	Family Name or Surname						
Inventor's Signature		Date					
Residence: City	State	Country Citizenship		Citizenship			
Mailing Address:							
City	State	Zip		Country			